

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

10-618-415

FILING DATE

07-11-03

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1ST AMENDMENT | | AFTER 2ND AMENDMENT | |
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| TOTAL CLAIMS | 9 | ██████████ | 12 | ██████████ | | |

| CLAIMS | IND | DEP | IND | DEP | IND | DEP |
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| TOTAL CLAIMS | | ██████████ | | ██████████ | | ██████████ |